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INFLUENZA VACCINE RECOMMENDED FOR MORE AMERICANS THAN EVER BEFORE

--The National Foundation for Infectious Diseases brings together leading health experts to urge annual flu vaccine for nearly 85 percent of Americans

-- Some influenza vaccine is already available in the U.S. Enough vaccine will be available so that anyone who wants to decrease their risk of flu can get vaccinated.

--Survey finds many doctors not talking to patients about getting their flu vaccines

--Experts stress importance of pneumococcal vaccination for everyone 65 years of age and older

Washington, D.C., September 24, 2008 – Each year, influenza kills more people in the U.S. than all other vaccine-preventable diseases combined. With some vaccine supply already available and ample supply expected throughout the season, the National Foundation for Infectious Diseases (NFID) and leading public health organizations are urging the public and the health care community to follow the latest Centers for Disease Control and Prevention (CDC) recommendations -- which call on some 261 million Americans to be vaccinated against influenza each year.

The recently expanded recommendations, which now include annual influenza vaccination for all children from six months through 18 years of age, were strongly endorsed today by a panel of leading experts gathered at a news conference. The panelists also addressed the significant public health benefits of annual influenza vaccination and pneumococcal vaccination. NFID sponsored the event in collaboration with the National Influenza Vaccine Summit, Centers for Disease Control and Prevention (CDC), American Academy of Pediatrics (AAP), AARP, American Medical Association (AMA) and Centers for Medicare and Medicaid Services (CMS).

New CDC data show that only one in five children 6 through 23 months of age (21.3 percent) were fully vaccinated against influenza during the 2006-07 season. The influenza vaccination rate in adults 65 years and over was 66.7 percent during the 2006-07 season, a figure well below the national targets for immunization rates set by the U.S. Department of Health and Human Services' Healthy People 2010. The expanded influenza vaccine recommendations for our nation's children increase the number of children targeted for annual vaccination by roughly 30 million. Providers and programs should continue to focus vaccination efforts on children and adolescents at higher risk for influenza complications as they transition to routinely vaccinating all children and adolescents.

"It's a fact that the influenza vaccine saves lives by not only helping to prevent flu but also by preventing the serious complications that sometimes result from infection with influenza," said CDC Director Dr. Julie Gerberding. "I want everyone that's recommended to get a vaccine to get one and for them to encourage their loved ones to get one too."

Among respondents to a new NFID survey, 70 percent said they would be very likely to get vaccinated against influenza if their health care professional recommended it to them, but many physicians do not discuss the importance of protection against influenza with their patients. “Patients rely on the information and recommendations they receive from their health care professionals,” said Dr. William Schaffner, President-elect of NFID and Professor and Chair of the Department of Preventive Medicine at Vanderbilt University School of Medicine. “Communication between patients and physicians about influenza and vaccination can lead to better outcomes. These kinds of discussions should be standard practice.”

While adding school-age children to those recommended for immunization against influenza, CDC has not changed the other population groups recommended for vaccination. Among those groups are people 50 years of age and over; people with certain chronic medical conditions; pregnant women; young children, and anyone in close contact with infants or other at-risk persons, including caretakers, family members and health care professionals. In addition, the agency recommends vaccination for anyone wanting to avoid becoming sick from influenza or passing it on to others.ⁱ

Vaccination Is Safe and Protects School-Age Children

The expanded recommendation is based on evidence that influenza vaccination is effective and safe for school-age children, and that influenza illness significantly impacts school absenteeism, increases antibiotic use, and leads to more medical care visits and parental work loss.

While the majority of influenza-related deaths occur in elderly persons, deaths have occurred in individuals of every age and health status. Eighty-six deaths in children were reported to CDC from the 2007-08 influenza season. “The death of even a single child from influenza is a tragedy that leaves its mark on the entire community, and it is especially tragic because influenza infection is generally preventable,” said Dr. Renée R. Jenkins, President of the American Academy of Pediatrics.

Reformulated Vaccine Expected to Provide Protection

For the upcoming season, based on data from the extensive global World Health Organization (WHO) influenza surveillance system, health officials decided to update all three viral strains in the influenza vaccine. CDC collaborates with WHO to track influenza viruses around the globe throughout the year. This surveillance network includes 121 additional collaborating laboratories in 94 countries.

“We are optimistic that this year’s vaccine will be on target in protecting against the flu,” said Dr. Daniel B. Jernigan, Deputy Director of the Influenza Division of the National Center for Immunization and Respiratory Diseases at the CDC. “The influenza vaccine offers the best protection against infection, reduces disease severity and the spread of the virus to others.”

NFID Survey Shows Physician Recommendation Is a Strong Factor in Influenza Immunization Outcomes

Nearly 80 percent of all respondents in a consumer survey of 2,029 adults say they have obtained an influenza vaccine at least once following a recommendation from a health care professional (HCP). While the importance of HCP recommendations is evident, nearly four in 10 respondents (38 percent) reported never having discussed influenza vaccination with their HCP. Of those who did talk to their HCP, half said that they initiated the discussion themselves. Among people 65 and older, a high-risk category for influenza-related complications and death, nearly 1 in 5 (18 percent) reported never having discussed influenza vaccination with their HCP. Among people aged 50 to 64, another group recommended for vaccination every year, the rate climbed to 31 percent.

“Physicians, and other health care professionals, play a critical role in helping patients make the best health care decisions, and our patients need to hear from us about the importance of the flu vaccine,” said Dr. Ardis D. Hoven, who serves on the board of trustees for the American Medical Association. “A health care

worker's recommendation is one of the strongest factors influencing patients to get vaccinated. In fact, 70 percent of all adults are immunized as a result. Health care workers are also the front line in the yearly battle against the flu and must themselves remember that getting vaccinated protects the health of patients and provides added protection for their loved ones. Only 42 percent of healthcare professionals received influenza vaccine in 2006."

Prevention and Well Being for Americans 50 and Over

"Americans are living longer, more active lives and managing increasing responsibilities at home and work," said Dr. Cora L. Christian, who serves on the board of directors for AARP. "A renewed emphasis on prevention is particularly important to ensure that we remain healthy as we get older," she added. "Quality preventive care includes immunization against influenza and pneumococcal disease."

Annual influenza vaccination is recommended for every American 50 and over, but large immunization differences exist between people 50 to 64 and those 65 and over. While 66.7 percent of people 65 and over were vaccinated against influenza last season, far fewer were in the 50 to 64 age range (36.2 percent).

According to Christian, "The message is not getting out to those in the 50-plus category the way we want it to. In the NFID survey, more than 30 percent of people 50 to 64 years of age said they have never had a conversation with their health care professional about getting an influenza vaccine. Many myths exist about influenza vaccination but the evidence is clear – vaccines, regardless of age, offer the best method to prevent disease."

Pneumococcal Vaccination Reduces Vaccine-Preventable Hospitalizations and Death

In addition to annual influenza immunization, the assembled experts urged all Americans 65 years of age and over to be vaccinated against pneumococcal disease, a leading cause of serious illness in children and adults worldwide. "Pneumococcal infection can cause pneumonia, meningitis and sepsis—all conditions that can lead to severe illness and even death. People 65 and over, and those with chronic medical conditions, can't fight this illness off the way a healthy younger adult can. Vaccine helps them avoid infection or it can reduce the severity of infection," said Dr. Kristin L. Nichol, Associate Chief of Staff for Research at Minneapolis VA Medical Center. However, in 2007, only 57.7% of Americans 65 years and older had ever received a pneumococcal vaccination.

According to CDC there were more than 40,000 U.S. cases of invasive pneumococcal disease in 2006, causing 4,500 deaths.ⁱⁱ

In addition to everyone 65 and older, pneumococcal vaccination is recommended for younger people with certain chronic illnesses, like pulmonary or cardiovascular disease. There is also a second type of pneumococcal vaccine recommended as part of the routine childhood immunization schedule for all children younger than 2 years of age.ⁱⁱⁱ

Government Health Insurers Encourage Providers to Immunize

"More than 30 percent of Americans receiving Medicare do not get vaccinated for influenza, and rates are similar for the pneumococcal vaccine," said Kerry Weems, Acting Administrator of Centers for Medicare and Medicaid Services. "Given that people 65 and older are at greatest risk from serious complications from the flu, it's especially crucial that Medicare recipients know the vaccines are available to them at no cost, and we encourage them to be proactive about getting them," he said.

Medicare pays for both vaccinations for all its beneficiaries. Vaccine and administration by recognized providers are completely covered under Medicare. Patients do not have to meet their deductibles in order to receive these benefits, nor are they required to make any co-payments.^{iv}

Medicare reimbursement for the flu shot in the coming year will increase almost 5 percent to \$18.20 for the preservative-free version, and a little over 1 percent, to \$22.32 for the nasal spray. Medicare will also pay \$16.88—almost 5 percent more than last year—for the preservative-free flu shot for children.

Next year, Medicare will pay \$32.70—10 percent more—for each dose of the pneumonia vaccine. The 2008 national average administration fee for these vaccinations is \$20.57. The fee amount for 2009 is not yet available.

Antivirals Provide a Second Line of Defense against Influenza Transmission

Experts also noted that prescription antiviral medications can offer important protection against influenza. If taken for treatment within 48 hours of symptom onset, these medications can reduce influenza symptoms and shorten the duration of illness.

Antiviral medications can also be used as a preventive measure for those who have been exposed to influenza or are at high risk for complications if they were to become infected. Prophylactic use of antivirals can help contain the spread of influenza in crowded settings like nursing homes, schools, households or the workplace. Antivirals can also be used in patients who cannot be vaccinated against flu because of severe (i.e., anaphylactic) egg allergies.

For the 2008-2009 influenza season, CDC recommends the use of two antiviral drugs, oseltamivir or zanamivir, for treatment and prevention of influenza. Two other antiviral medications, amantadine and rimantadine, are not currently recommended by CDC due to high levels of influenza virus resistance.^v

Trends Show Vaccination Rates Drop Drastically by Mid-December, but Vaccination Is Beneficial throughout the Season

Optimally, those seeking vaccination should get the vaccine before flu viruses start causing illnesses. However, vaccination efforts should continue into December, January and beyond since flu season most often peaks in January, February or later. Most adults acquire antibody protection against the virus about 2 weeks after vaccination.^{vi}

Data published this year in a supplement to *The American Journal of Medicine* indicate that as many as 25 million patients at high risk for serious influenza-related illness visit their health care professionals an average of 2.2 times each during the time when influenza vaccination is appropriate, yet they still do not receive the influenza vaccination.^{vii}

“We have millions of at-risk persons accessing the medical system multiple times throughout the immunization season,” said Schaffner. “With ample supply on hand throughout the winter months, it is imperative that health care professionals use all of those opportunities to get their patients vaccinated.”

About the National Foundation for Infectious Diseases

The National Foundation for Infectious Diseases (NFID) is a non-profit, tax-exempt (501c3) organization founded in 1973 and dedicated to educating the public and health care professionals about the causes, treatment and prevention of infectious diseases.

About the National Influenza Vaccine Summit

The National Influenza Vaccine Summit, co-sponsored by CDC and the AMA, is a group of more than 400 members representing 130 organizations, including: professional medical and public health organizations, advocacy groups, pharmacists, vaccine manufacturers and distributors, payers, representatives from hospitals and long term care facilities, health care providers and other influenza vaccine stakeholders. The

Summit's goal is to address, discuss and help to resolve influenza vaccine issues and to increase utilization of vaccine in accordance with the Advisory Committee on Immunization Practices recommendations.

This news conference is sponsored by the National Foundation for Infectious Diseases (NFID) in partnership with the National Influenza Vaccine Summit and is supported, in part, by the Centers for Disease Control and Prevention, and through unrestricted educational grants to NFID from the Centers for Medicare & Medicaid Services, CSL Biotherapies, Inc., Flu Vaccine Business Practices Initiative (c/o HIDA), GlaxoSmithKline, Henry Schein, Inc., MedImmune Inc., Merck and Co., Inc., Novartis Vaccines, Roche, and sanofi pasteur.

ⁱ Centers for Disease Control and Prevention. Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR* 2008; 57 (RR-7). Available at: <http://www.cdc.gov/mmwr/PDF/rr/rr5707.pdf>.

ⁱⁱ Centers for Disease Control and Prevention. Active Bacterial Core Surveillance Report, Emerging Infections Program Network, *Streptococcus pneumoniae*. Unpublished data, 2007.

ⁱⁱⁱ Centers for Disease Control and Prevention. 1997. Prevention of Pneumococcal Disease: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR*, April 4, 1997; 46 (RR-8): 1-25. Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/00047135.htm>.

^{iv} Centers for Medicare & Medicaid Services: Adult Immunizations Overview. Available at <http://www.cms.hhs.gov/AdultImmunizations/>.

^v Centers for Disease Control and Prevention. Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR* 2008; 57 (RR-7). Available at: <http://www.cdc.gov/mmwr/PDF/rr/rr5707.pdf>.

^{vi} Centers for Disease Control and Prevention. Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR* 2008; 57 (RR-7). Available at: <http://www.cdc.gov/mmwr/PDF/rr/rr5707.pdf>.

^{vii} Supplement to *The American Journal of Medicine*: Expanding the Influenza Vaccination Season: A New Paradigm for Increasing Immunization Rates. Ed Dr. William Schaffner July 2008, Vol. 121, Number 7B.

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